

## Form 592-B – Nonresident Withholding Tax Statement

Field Number	Field Name	Form Ref.	Type	Length	Field Description	2005 Chg
	Byte Count			4	"nnnn" for variable	
	Start Of Record Sentinel			4	Value "*****"	
0000	Record ID			34	Value "FRMbbb592BbbPG01b(9n)b(7n)" 7n=Form Occurrence Number; 9n=Taxpayer SSN	
	<b>Part I - Recipient</b>					
0010	Social Security Number		N	9		
0020	FEIN		N	9		
0030	Name		A	30		
0040	Address		AN	30		
0050	Private Mailbox Number		AN	9	Not Used	
0060	City, State, ZIP		AN	30		
	<b>Part II – Withholding Agent</b>					
0070	Social Security Number		N	9		
0080	FEIN		N	9		
0085	California Corp. Number		N	7		
0090	Name		A	30		
0100	Address		AN	30		
0110	Private Mailbox Number		AN	9	Not Used	
0120	City, State, ZIP		AN	30		
0130	Daytime Telephone Number		N	10		

## Form 592-B (continued)

Field Number	Field Name	Form Ref.	Type	Length	Field Description	2005 Chg
	<b>Part III – Type of Income Subject to Withholding</b>					9/28
0210	Payment to Independent Contractor		A	1	"X" or Blank	
0220	Rents or Royalties		A	1	"X" or Blank	
0230	Estate Distributions		A	1	"X" or Blank	
0240	Trust Distributions		A	1	"X" or Blank	
0250	Allocations To Foreign Nonresident Partner/Member		A	1	"X" or Blank	
0260	Distributions to Domestic Nonresident Partner/Member		A	1	"X" or Blank	
0265	Other Income Subject to Withholding – Indicator		A	1	"X" or Blank	
0270	Other Income Subject to Withholding – Description		AN	78	Describe	
	<b>Part IV – Tax Withheld</b>					9/28
0280	Total Amount Subject to Withholding		N	12		
0290	Total California Tax Withheld		N	12		
	Record Terminus Character			1	Value "#"	

Deleted Fields 0140-0200